

# Senate File 2061 - Introduced

SENATE FILE 2061

BY McCOY

## A BILL FOR

1 An Act requiring that certain health insurance policies  
2 provide coverage for preventive screenings and services for  
3 colorectal cancer.

4 BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF IOWA:

1     Section 1. NEW SECTION.   **514C.26 Preventive health care**  
2 **services — colorectal cancer screening coverage.**

3     1. Notwithstanding the uniformity of treatment requirements  
4 of section 514C.6, a policy, contract, or plan providing for  
5 third-party payment or prepayment of health or medical expenses  
6 shall provide coverage for the cost of preventive health care  
7 services for colorectal cancer screening as provided in this  
8 section.

9     2. Such coverage shall be provided for preventive health  
10 care services for colorectal cancer screening for the early  
11 detection of colorectal cancer and adenomatous polyps for all  
12 of the following covered persons:

13     a. Asymptomatic, average-risk adults who are fifty years of  
14 age or older.

15     b. Persons who are at high risk for colorectal cancer,  
16 including persons who have a family medical history of  
17 colorectal cancer, a prior occurrence of cancer or precursor  
18 neoplastic polyps, a prior occurrence of a chronic digestive  
19 disease condition such as inflammatory bowel disease, Crohn's  
20 disease, or ulcerative colitis, or who have other predisposing  
21 factors as determined by the person's treating physician.

22     3. Such coverage shall include colorectal cancer screening,  
23 as determined by a covered person's treating physician, that  
24 detects colorectal cancer or adenomatous polyps, pursuant to a  
25 recommendation adopted by the task force.

26     4. As used in this section, unless the context otherwise  
27 requires:

28     a. "*Recommendation*" means a recommendation adopted by the  
29 task force that does either of the following:

30       (1) Strongly recommends that clinicians provide a  
31 preventive health care service for the early detection of  
32 colorectal cancer or adenomatous polyps to eligible patients  
33 because the task force found good evidence that the preventive  
34 health care service improves important health outcomes and  
35 concluded that the benefits of the preventive health care

1 service substantially outweigh the harms of providing the  
2 service.

3 (2) Recommends that clinicians provide a preventive health  
4 care service for the early detection of colorectal cancer or  
5 adenomatous polyps to eligible patients because the task force  
6 found fair evidence that the preventive health care service  
7 improves important health outcomes and concluded that the  
8 benefits of the preventive health care service outweigh the  
9 harms of providing the service.

10 *b. "Small employer"* means a person actively engaged in  
11 business who, during at least fifty percent of the employer's  
12 working days during the preceding calendar year, employed not  
13 less than two and not more than fifty full-time equivalent  
14 employees.

15 *c. "Task force"* means the United States preventive services  
16 task force, or any successor organization, sponsored by the  
17 agency for health care research and quality of the United  
18 States department of health and human services.

19 5. Coverage required pursuant to this section shall not be  
20 subject to policy, contract, or plan deductibles. Copayments  
21 and coinsurance may apply to coverage required pursuant to  
22 this section. For a health maintenance organization that  
23 directly provides health care services to its enrollees, the  
24 policy deductibles, copayments, coinsurance, and any other form  
25 of cost sharing for the total costs associated with coverage  
26 required by this section shall not exceed ten percent of the  
27 cost of the preventive health care service required by this  
28 section.

29 6. *a.* This section applies to the following classes of  
30 third-party payment provider policies, contracts, or plans  
31 delivered, issued for delivery, continued, or renewed in this  
32 state on or after July 1, 2010:

33 (1) Individual or group accident and sickness insurance  
34 providing coverage on an expense-incurred basis.

35 (2) An individual or group hospital or medical service

1 contract issued pursuant to chapter 509, 514, or 514A.

2 (3) An individual or group health maintenance organization  
3 contract regulated under chapter 514B.

4 (4) A policy, contract, or plan offered by an entity that  
5 is engaged in the business of insurance, risk transfer, or  
6 risk retention and that is subject to the jurisdiction of the  
7 commissioner.

8 (5) A plan established pursuant to chapter 509A for public  
9 employees.

10 (6) A policy, contract, or plan offered by an organized  
11 delivery system licensed by the director of public health.

12 b. Notwithstanding paragraph "a", a small employer may  
13 purchase health benefit coverage that does not include the  
14 coverage required by this section.

15 c. This section shall not apply to accident-only, specified  
16 disease, short-term hospital or medical, hospital confinement  
17 indemnity, credit, dental, vision, Medicare supplement,  
18 long-term care, basic hospital and medical-surgical expense  
19 coverage as defined by the commissioner by rule, disability  
20 income insurance coverage, coverage issued as a supplement  
21 to liability insurance, workers' compensation or similar  
22 insurance, or automobile medical payment insurance.

23 EXPLANATION

24 This bill creates new Code section 514C.26, which requires  
25 that certain health insurance policies, contracts, or plans  
26 provide coverage for preventive health services for colorectal  
27 cancer screening for the early detection of colorectal cancer  
28 and adenomatous polyps. The coverage is required for covered  
29 persons who are asymptomatic, average-risk adults 55 years of  
30 age or older or persons at high risk for colorectal cancer,  
31 based on a number of specified factors.

32 The required coverage includes tests as determined by a  
33 covered person's treating physician that detect colorectal  
34 cancer or adenomatous polyps pursuant to a recommendation made  
35 by the United States preventive services task force, sponsored

1 by the agency for health care research and quality, which is  
2 the health services research arm of the federal department  
3 of health and human services. Such recommendations must be  
4 based either on a strong recommendation by the task force  
5 that there is good evidence or a recommendation that there is  
6 fair evidence that the preventive health care service being  
7 recommended improves important health outcomes and that the  
8 benefits of the service outweigh the harms of providing the  
9 service.

10 New Code section 514C.26 applies to specified classes of  
11 third-party payment provider policies, contracts, or plans  
12 delivered, issued for delivery, continued, or renewed in this  
13 state on or after July 1, 2010. A small employer employing two  
14 to 50 employees is not required to purchase the required health  
15 services coverage. The Code section also does not apply to  
16 specified limited types of health coverage.